Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check i amende

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued ure identification (for mple, your driver's	First name	First name
		nse or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	McEvoy Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-4270	

Del	otor 1 Francis McEvoy		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	53 West Montauk Hwy, Apt. E	If Debtor 2 lives at a different address:
		Lindenhurst, NY 11757 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Suffolk	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1 Francis McEvoy					Case number (if known)	
Par	t 2: Tell the Court About	our Bankru	ptcy Cas	se			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chapter	r 7				
		☐ Chapter	11				
		☐ Chapter	12				
		☐ Chapter	r 13				
8.	How you will pay the fee	abou order	t how you	u may pay. Typically, attorney is submitting	if you are paying the fee	eck with the clerk's office in your local yourself, you may pay with cash, cash chalf, your attorney may pay with a cre	ier's check, or money
		☐ I nee	d to pay	the fee in installme	ents. If you choose this op	tion, sign and attach the Application for	or Individuals to Pay
			•	e in Installments (Offi	,	ion only if you are filing for Chanter 7	Du laur a judga may
		but is that a	not requapplies to	uired to, waive your for your for your family size and	ee, and may do so only if y I you are unable to pay the	ion only if you are filing for Chapter 7. your income is less than 150% of the case the in installments). If you choose this (Official Form 103B) and file it with you	official poverty line is option, you must fill
9.	Have you filed for	_					
Э.	Have you filed for bankruptcy within the last 8 years?	■ No. □ Yes.					
	·		District		When	Case number	
			District		When		
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	-
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No.	Go to lir	ne 12.			
	residence?	Yes.	Has you	ur landlord obtained	an eviction judgment agair	nst you?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial S</i> bankruptcy petition.	tatement About an Evictio	n Judgment Against You (Form 101A)	and file it with this

Deb	tor 1 Francis McEvoy				Case number (if known)	
Part	Report About Any Bu	usinesses	You Owr	as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a		Numb	er, Street, City, Sta	te & ZIP Code	
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	x to describe your business:	
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).			
	For a definition of <i>small</i>	■ No.	I am	not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am 1	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Dow	Donort if You Own o	- Ilava A		Dunungutu au Au	v Proposite That No ale large dista Attantion	
Pari	Do you own or have any		/ mazarud	ous Property or An	y Property That Needs Immediate Attention	
17.	property that poses or is	■ No.				
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	Where is the property?				
	- ,				Number, Street, City, State & Zip Code	

Doc 1 Case 8-18-78163-las Filed 12/04/18 Entered 12/04/18 09:31:24 Debtor 1 Francis McEvoy Case number (if known) Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5: About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit ☐ I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit ☐ I received a briefing from an approved credit You must truthfully check one of the following counseling agency within the 180 days before I counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have choices. If you cannot do so, you are not eligible to a certificate of completion. certificate of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of:

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

Deb	otor 1 Francis McEvoy			Case	e number (if known)		
Par	t 6: Answer These Questi	ions for Repo	orting Purposes				
16.	What kind of debts do you have?		ia. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred lindividual primarily for a personal, family, or household purpose."				
	•		No. Go to line 16b.	, ,			
			Yes. Go to line 17.				
			e your debts primarily busine oney for a business or investme				
			No. Go to line 16c.				
			Yes. Go to line 17.				
		16c. St	ate the type of debts you owe th	at are not consumer debts or	business debts		
17.	Are you filing under Chapter 7?	□ No. I a	m not filing under Chapter 7. G	o to line 18.			
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will		No				
	be available for distribution to unsecured creditors?		Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000	2 5,001-50,0		
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000 ☐ 10,001-25,000	□ 50,001-100		
		☐ 100-199 ☐ 200-999		10,001-25,000	☐ More than1	00,000	
19.	How much do you	\$0 - \$50 ,	000	□ \$1,000,001 - \$10 million	□ \$500,000,0	01 - \$1 billion	
	estimate your assets to be worth?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
		— \$000,00.	ψ1 mmon				
20.	How much do you estimate your liabilities	□ \$0 - \$50, □ \$50,001		□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 millio		01 - \$1 billion),001 - \$10 billion	
	to be?	_		□ \$50,000,001 - \$50 million		0,001 - \$10 billion 00,001 - \$50 billion	
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 mil			
Par	t 7: Sign Below						
For	you	I have exam	ined this petition, and I declare	under penalty of perjury that t	he information provided is tr	ue and correct.	
			sen to file under Chapter 7, I an s Code. I understand the relief a				
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					me fill out this	
		I request reli	ef in accordance with the chapt	er of title 11, United States Co	ode, specified in this petition		
		bankruptcy of 1519, and 3					
		/s/ Francis Francis Me Signature of	Evoy	Signature	of Debtor 2		
		Executed or	December 3, 2018	Executed of	m MM / DD / YYYY		

Debtor 1 Francis McEvoy		Cas	se number (if known)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition, dec under Chapter 7, 11, 12, or 13 of title 11, United States Co for which the person is eligible. I also certify that I have de-	de, and have	explained the relief available under each chapter
If you are not represented by an attorney, you do not need to file this page.	342(b) and, in a case in which § 707(b)(4)(Ď) applies, cert in the schedules filed with the petition is incorrect.	ify that I have	no knowledge after an inquiry that the information
	/s/ Cooper J Macco	Date	December 3, 2018
	Signature of Attorney for Debtor		MM / DD / YYYY
	Cooper J Macco		
	Printed name		
	Macco and Stern, LLP		
	Firm name		
	2950 Express Drive South		
	Suite 109		
	Islandia, NY 11749		
	Number, Street, City, State & ZIP Code		
	Contact phone 631-549-7900	Email address	
	240151 NY		
	Bar number & State		

Fill	in this information to identify your case:		
Deb	tor 1 Francis McEvoy		
Deh	First Name Middle Name Last Name tor 2		
1 .	use if, filing) First Name Middle Name Last Name		
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		
Cas (if kno	e number	_	ck if this is an
		anc	naca ming
∩ff	icial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a	s complete and accurate as possible. If two married people are filing together, both are equally responsible to mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendoriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Pari	Summanze Tour Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	. \$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	. \$	4,115.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,115.00
Part	2: Summarize Your Liabilities		
		Your	liabilities
			nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,300.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	117,225.41
	Your total liabilities	\$	118,525.41
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	811.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,197.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your content of the court with your content	our other:	schedules.
7.	■ Yes What kind of debt do you have?		
••	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a person	al, family, or
	household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.		
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the the court with your other schedules.	is box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Francis McEvoy Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

8. 46.42

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total o	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,300.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	97,671.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	98,971.00

Fill in this int		and this filing.		
	rmation to identify your case a	and this filling:		
Debtor 1	Francis McEvoy First Name	Middle Name Last Name		
Debtor 2				
(Spouse, if filing)	First Name	Middle Name Last Name		
United States Ba	ankruptcy Court for the: EAST	ERN DISTRICT OF NEW YORK		
Case number				☐ Check if this is an
				amended filing
Official Fo	orm 106A/B			
	le A/B: Property			40/45
			a antonomy list the accest in	12/15
it fits best. Be as	complete and accurate as possible	List an asset only once. If an asset fits in more than one. If two married people are filing together, both are equals form. On the top of any additional pages, write your national pages.	ally responsible for supplyi	ng correct information. If
Part 1: Describe	Each Residence, Building, Land,	or Other Real Estate You Own or Have an Interest In		
1. Do you own or	have any legal or equitable interes	t in any residence, building, land, or similar property?		
■ No. Go to Pa				
_				
☐ Yes. Where	is the property?			
Part 2: Describe	Your Vehicles			
someone else dr		interest in any vehicles, whether they are regist report it on Schedule G: Executory Contracts and chicles, motorcycles		y vehicles you own that
_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
□ No				
Yes				
3.1 Make:	Hyundai	Who has an interest in the property? Check one	Do not deduct secured	claims or exemptions. Put
Model:	Santa Fe	Debtor 1 only		ured claims on Schedule D: laims Secured by Property.
Year:	2003	Debtor 2 only	Current value of the	Current value of the
Approxima	te mileage: 217,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other infor	mation:	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$300.00	\$300.00
Examples: Boo ■ No □ Yes 5 Add the doll	ats, trailers, motors, personal wa	and other recreational vehicles, other vehicles, are attercraft, fishing vessels, snowmobiles, motorcycle with for all of your entries from Part 2, including an that number here	accessories ny entries for	\$300.00
Part 3: Describe	Your Personal and Household Ite	ems		
		terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	oods and furnishings lajor appliances, furniture, linens	s, china, kitchenware		

Official Form 106A/B Schedule A/B: Property page 1

De	ebtor 1	Francis McE	voy Case number (if kno	own)
	Yes.	Describe		
			Misc household goods	\$1,000.00
7.	□No	les: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; months phones, cameras, media players, games	usic collections; electronic devices
			Misc electronics	\$500.00
8.	Exampl		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, ons, memorabilia, collectibles	coin, or baseball card collections;
			Bass Guitars	\$1,000.00
	■ No □ Yes. Firearr Exampl ■ No	musical instru Describe ms	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; car	noes and kayaks; carpentry tools;
11.	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			Wearing apparel	\$500.00
12.	■ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ge	ms, gold, silver
13.	Exam _l ■ No	arm animals ples: Dogs, cats,	birds, horses	
14.	■ No	ther personal and	d household items you did not already list, including any health aids you did not li	st
15			of all of your entries from Part 3, including any entries for pages you have attached number here	\$3,000.00
Pa	rt 4: De	escribe Your Financ	cial Assets	

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured

Official Form 106A/B Schedule A/B: Property

page 2

Debtor 1	Francis McE	voy	Cas	e number (if known)	
		_			claims or exemptions.
□ No		ave in your wallet, in your ho	me, in a safe deposit box, and on hand whe	en you file your petition	
				Cash	\$5.00
			unts; certificates of deposit; shares in credi with the same institution, list each.	t unions, brokerage hous	es, and other similar
	i		Institution name:		
		17.1. Savings	Ocean Financial Federal Credit	t Union	\$10.00
		or publicly traded stocks	kerage firms, money market accounts		
■ No	•				
☐ Yes		Institution or issuer	name:		
	oublicly traded sto	ock and interests in incorpo	orated and unincorporated businesses, in	ncluding an interest in	an LLC, partnership,
■ No					
☐ Yes	. Give specific info	ormation about them Name of entity:		of ownership:	
Nego	tiable instruments	include personal checks, cas	tiable and non-negotiable instruments hiers' checks, promissory notes, and mone nsfer to someone by signing or delivering the		
	. Give specific info	rmation about them Issuer name:			
Exam	ement or pension aples: Interests in I		03(b), thrift savings accounts, or other pens	sion or profit-sharing plar	s
■ No □ Yes	. List each accoun	t separately. Type of account:	Institution name:		
Your		d deposits you have made so	that you may continue service or use from public utilities (electric, gas, water), telecom		or others
_	i		Institution name or individual:		
		Security deposit	Joe Cuccinella - landlord		\$800.00
	ition (A contract fo				
23. Annui ■ No	ities (A contract to	r a periodic payment of mone	y to you, either for life or for a number of ye	ears)	
	Iss	uer name and description.			
26 U.S	sts in an education S.C. §§ 530(b)(1), 5	on IRA, in an account in a q (29A(b), and 529(b)(1).	ualified ABLE program, or under a qualif	ied state tuition progra	m.
■ No □ Yes	Ins	stitution name and description	s. Separately file the records of any interests	s.11 U.S.C. § 521(c):	
25. Trusts	s, equitable or fut	ure interests in property (o	ther than anything listed in line 1), and ri	ghts or powers exercis	able for your benefit
■ No □ Yes	. Give specific info	ormation about them			

Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Francis McEvoy	Case number (if known)	
26.	_Examp	ss, copyrights, trademarks, trade secrets, and other intellectual poles: Internet domain names, websites, proceeds from royalties and		
	■ No □ Yes	Give specific information about them		
		·		
27.		ses, franchises, and other general intangibles ples: Building permits, exclusive licenses, cooperative association ho	oldings, liquor licenses, professional licens	es
		Give specific information about them		
M	oney or	property owed to you?		Current value of the
				portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to you		
	■ No		61.14	
	⊔ Yes.	Give specific information about them, including whether you already	filed the returns and the tax years	
29.	Family	y support		
	Exam _i ■ No	ples: Past due or lump sum alimony, spousal support, child support,	maintenance, divorce settlement, property	settlement
		Give specific information		
		·		
30.		amounts someone owes you ples: Unpaid wages, disability insurance payments, disability benefits benefits; unpaid loans you made to someone else	s, sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No	solution, alipaid isalis you made to comestic size		
	☐ Yes.	Give specific information		
31.		sts in insurance policies ples: Health, disability, or life insurance; health savings account (HSA	A): cradit homeowner's or renter's insura	000
	■ No	pres. Freath, disability, or life insurance, freath savings account (Fre	ry, creak, nomeowner 3, or remer 3 insural	
	☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund
		Company name.	Donondary.	value:
32.	If you some	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurone has died.	ance policy, or are currently entitled to reco	eive property because
	■ No	Characteristic information		
	⊔ Yes.	Give specific information		
33.		s against third parties, whether or not you have filed a lawsuit o ples: Accidents, employment disputes, insurance claims, or rights to		
	■ No			
		Describe each claim		
34.	Other o	contingent and unliquidated claims of every nature, including c	ounterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim		
35.	_ `	nancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36		the dollar value of all of your entries from Part 4, including any o art 4. Write that number here		\$815.00
			L	

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Official Form 106A/B Schedule A/B: Property page 4

Debte	or 1 Fran	cis McEvoy		Case number (if known)	
37. D c	you own or h	ave any legal or equitable interest in any business-rela	ted property?		
	No. Go to Part	6.			
	Yes. Go to line	38.			
Part 6		ny Farm- and Commercial Fishing-Related Property Yo or have an interest in farmland, list it in Part 1.	ou Own or Have an Interest	t In.	
46. D	o you own o	or have any legal or equitable interest in any far	m- or commercial fishi	ng-related property?	
ı	No. Go to Pa	art 7.			
[Yes. Go to I	ine 47.			
Part 7	Descr	ibe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
E	Examples: Se	other property of any kind you did not already li ason tickets, country club membership	st?		
	No				
	Yes. Give sp	pecific information			
54.	Add the doll	ar value of all of your entries from Part 7. Write	that number here		\$0.00
Part 8	Eist the	Totals of Each Part of this Form			
55.	Part 1: Total	real estate, line 2			\$0.00
56.	Part 2: Total	vehicles, line 5	\$300.00		
57.	Part 3: Total	personal and household items, line 15	\$3,000.00		
58.	Part 4: Total	financial assets, line 36	\$815.00		
59.	Part 5: Total	business-related property, line 45	\$0.00		
60.	Part 6: Total	farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total	other property not listed, line 54	+\$0.00		
62.	Total persor	nal property. Add lines 56 through 61	\$4,115.00	Copy personal property total	\$4,115.00
63.	Total of all p	property on Schedule A/B. Add line 55 + line 62			\$4,115.00

Official Form 106A/B Schedule A/B: Property page 5

Fil	I in this inforn	nation to identify your case:				
	ebtor 1	Francis McEvoy				
			Middle Name	L	ast Name	
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name	
			TERN DISTRICT OF N	FW Y	ORK	
Oi	iiled States Dai	ikruptcy Court for the	TERRODOTRIOT OF IV		<u>Ortic</u>	
	ase number					☐ Check if this is an
						amended filing
O	fficial Fo	rm 106C				
S	chedule	e C: The Prope	rty You Cla	aim	as Exempt	4/16
the nee and	property you list eded, fill out and d case number	sted on <i>Schedule A/B: Proper</i> ty d attach to this page as many o (if known).	y (Official Form 106A/B copies of <i>Part 2: Additic</i>) as yo onal Pa	our source, list the property that younge as necessary. On the top of an	or supplying correct information. Using u claim as exempt. If more space is y additional pages, write your name
spe any fun exe	ecific dollar and applicable standard applicable standard applicable up applicable appli	nount as exempt. Alternativel atutory limit. Some exemptio nlimited in dollar amount. Ho	ly, you may claim the ns—such as those fo owever, if you claim ar	full fa r heal n exei	ir market value of the property be th aids, rights to receive certain mption of 100% of fair market val	One way of doing so is to state a eing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the nt, your exemption would be limited
Pa	rt 1: Identif	y the Property You Claim as	Exempt			
1.	Which set of	exemptions are you claiming	g? Check one only, eve	en if yo	our spouse is filing with you.	
	☐ You are cla	aiming state and federal nonba	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	You are cla	aiming federal exemptions. 11	II.S.C. & 522(b)(2)			
2		,	- , , , ,	omnt	fill in the information below.	
۷.	Brief description	on of the property and line on that lists this property	Current value of the portion you own	•	ount of the exemption you claim	Specific laws that allow exemption
	Genedale A/D	mat hists this property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	-	lai Santa Fe 217,000 miles	\$300.00		\$300.00	11 U.S.C. § 522(d)(2)
	Line from Sch	nedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Misc house	hold goods nedule A/B: 6.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
					100% of fair market value, up to any applicable statutory limit	
	Misc electro	onics nedule A/B: 7.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	Line from Gor	iodale 772. TT			100% of fair market value, up to any applicable statutory limit	
	Bass Guitar	rs nedule A/B; 8.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)
					100% of fair market value, up to any applicable statutory limit	
	Wearing ap	parel nedule A/B: 11.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	LING HOITI GOI				100% of fair market value, up to any applicable statutory limit	

Official Form 106C

De	btor 1 Francis McEvoy			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Cash Line from Schedule A/B: 16.1	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Ellie Holli Goriodale 772. 1411			100% of fair market value, up to any applicable statutory limit	
	Savings: Ocean Financial Federal Credit Union	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Security deposit: Joe Cuccinella -	\$800.00		\$800.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			iled on or after the date of adjustme	ent.)
	Ξ	ared by the exemption w	ithin 1	215 days before you filed this cook	. 2
	☐ Yes. Did you acquire the property cove☐ No	ried by the exemption w	1111111111	,215 days before you filed this case	;
	☐ Yes				
	□ 162				

Fill in this information to identify your case:				
Debtor 1	Francis McEvoy			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Official Form 106D

		ation to identify your cas					
Debt	or 1	Francis McEvoy					
5	•	First Name	Middle Name Last N	lame			
Debt (Spous	or 2 se if, filing)	First Name	Middle Name Last N	lame			
			ASTERN DISTRICT OF NEW YOR				
		·					
Case (if kno	e number					Charle	if their in an
(II KIIO	wn)					_	if this is an led filing
Be as any ex Sched D: Cre the Co number Part	complete and a tecutory contra lule G: Executo editors Who Harontinuation Pager (if known). 1: List All to any creditors No. Go to Paragraphy of the contract of the contrac	accurate as possible. Use Pa acts or unexpired leases that bry Contracts and Unexpired we Claims Secured by Prope ge to this page. If you have n of Your PRIORITY Unse s have priority unsecured cla		and Part 2 fo tory contracts clude any cred Part you need,	s on Schedule A/B: Pro ditors with partially sec fill it out, number the	perty (Official Form cured claims that are entries in the boxes	106A/B) and on listed in Schedule on the left. Attach
2. L	dentify what type	e of claim it is. If a claim has be	a creditor has more than one priority unsection the priority and nonpriority amounts, list the	at claim here a	nd show both priority and	d nonpriority amounts.	As much as
2. L id p	dentify what type lossible, list the of . If more than or	e of claim it is. If a claim has be claims in alphabetical order ac ne creditor holds a particular c	oth priority and nonpriority amounts, list that coording to the creditor's name. If you have laim, list the other creditors in Part 3.	at claim here are more than two	nd show both priority and	d nonpriority amounts.	As much as
2. L id p 1	dentify what type lossible, list the of . If more than or	e of claim it is. If a claim has be claims in alphabetical order ac ne creditor holds a particular c	oth priority and nonpriority amounts, list the cording to the creditor's name. If you have	at claim here are more than two	nd show both priority and	d nonpriority amounts.	As much as
2. L ic p 1 (I	dentify what type lossible, list the control of the	e of claim it is. If a claim has be claims in alphabetical order ac ne creditor holds a particular c ion of each type of claim, see t Revenue Service	oth priority and nonpriority amounts, list that coording to the creditor's name. If you have laim, list the other creditors in Part 3.	at claim here and more than two	nd show both priority and priority unsecured clair	d nonpriority amounts. ns, fill out the Continu Priority	As much as ation Page of Part Nonpriority
2. L ic p 1 (I	dentify what type lossible, list the our on the our or our our our our our our our our	e of claim it is. If a claim has be claims in alphabetical order ac ne creditor holds a particular clion of each type of claim, see the sevenue Service ditor's Name	oth priority and nonpriority amounts, list that coording to the creditor's name. If you have laim, list the other creditors in Part 3. he instructions for this form in the instructi	at claim here and two transfer more than two transfer more than two transfer more than two transfer more than the transfer more than two transfer more than the	nd show both priority and priority unsecured claim	d nonpriority amounts. ns, fill out the Continu Priority amount	As much as ation Page of Part Nonpriority amount
2. L ic p 1 (I	dentify what type lossible, list the control list the con	e of claim it is. If a claim has be claims in alphabetical order ache creditor holds a particular clion of each type of claim, see the sevenue Service ditor's Name 7317 phia, PA 19101-7317	oth priority and nonpriority amounts, list that cording to the creditor's name. If you have laim, list the other creditors in Part 3. the instructions for this form in the instruction Last 4 digits of account number when was the debt incurred?	at claim here and a more than two on booklet.) Deter	Total claim \$1,300.00 2009, 2011	d nonpriority amounts. ns, fill out the Continu Priority amount	As much as ation Page of Part Nonpriority amount
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2. L id p 1 (I	dentify what type lossible, list the list if more than or For an explanation Internal I Priority Crect PO Box 7 Philadely Number Streen	e of claim it is. If a claim has be claims in alphabetical order ache creditor holds a particular clion of each type of claim, see the sevenue Service ditor's Name 7317 phia, PA 19101-7317	oth priority and nonpriority amounts, list that cording to the creditor's name. If you have laim, list the other creditors in Part 3. the instructions for this form in the instruction Last 4 digits of account number when was the debt incurred?	at claim here and a more than two on booklet.) Deter	Total claim \$1,300.00 2009, 2011	d nonpriority amounts. ns, fill out the Continu Priority amount	As much as ation Page of Part Nonpriority amount
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2. L ic p 1 (I	Internal I Priority Crec PO Box Philadely Number Stre Who incurred to Debtor 1 on	e of claim it is. If a claim has be claims in alphabetical order ache creditor holds a particular clion of each type of claim, see to the claim in the control of the claim in	both priority and nonpriority amounts, list that coording to the creditor's name. If you have laim, list the other creditors in Part 3. the instructions for this form in the instructions. Last 4 digits of account numb. When was the debt incurred? As of the date you file, the classification. Unliquidated Disputed	e more than two on booklet.) er 2005, 2 im is: Check a	Total claim \$1,300.00 2009, 2011	d nonpriority amounts. ns, fill out the Continu Priority amount	As much as ation Page of Part Nonpriority amount
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2. L id p 1	Internal I Priority Crec PO Box Number Stre Who incurred to Debtor 1 and At least one Check if thi	e of claim it is. If a claim has be claims in alphabetical order ac ne creditor holds a particular clion of each type of claim, see to claim the control of the claim to the c	both priority and nonpriority amounts, list the coording to the creditor's name. If you have laim, list the other creditors in Part 3. the instructions for this form in the instructions. Last 4 digits of account numb. When was the debt incurred? As of the date you file, the classical Contingent. Unliquidated Disputed Type of PRIORITY unsecured. Domestic support obligation.	e more than two on booklet.) er 2005, 2 im is: Check a claim: s ts you owe the	Total claim \$1,300.00 2009, 2011 all that apply	d nonpriority amounts. ns, fill out the Continu Priority amount	As much as ation Page of Part Nonpriority amount
2. L ic p 1 (I	Internal I Priority Crec PO Box Number Stre Who incurred to Debtor 1 and At least one Check if thi	e of claim it is. If a claim has be claims in alphabetical order ac ne creditor holds a particular claim of each type of claim, see to it in order ac ne creditor holds a particular claim. See the constant of each type of claim, see the claim of each type of claim. See the claim of the claim is for a community is claim is for a community in the claim in the claim is for a community in the claim in the claim is for a community in the claim in the claim is for a community in the claim in the claim is for a community in the claim in the claim is for a community in the claim in the claim in the claim is for a community in the claim in the claim in the claim is for a community in the claim i	both priority and nonpriority amounts, list the coording to the creditor's name. If you have laim, list the other creditors in Part 3. The instructions for this form in the instruction in the instructio	e more than two on booklet.) er 2005, 2 im is: Check a claim: s ts you owe the	Total claim \$1,300.00 2009, 2011 all that apply	d nonpriority amounts. ns, fill out the Continu Priority amount	As much as ation Page of Part Nonpriority amount

Best Case Bankruptcy

Debto	Francis McEvoy		Case num	nber (if known)		
2.2	NYS Department of	Last 4 digits of account number		\$0.00	\$0.00	\$0.00
	Priority Creditor's Name Taxation & Finance Bankruptcy Unit PO Box 5300 Albany, NY 12205-5300	When was the debt incurred?	2005, 200	9, 2011		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all th	nat apply		
V	/ho incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the gov	vernment		
Is	the claim subject to offset?	☐ Claims for death or personal inj	ury while you w	vere intoxicated		
	No	Other. Specify				
	Yes	For Notici	ng Purpose	Only		
cla	at all of your nonpriority unsecured claims in the a im, list the creditor separately for each claim. For each ditor holds a particular claim, list the other creditors in	ch claim listed, identify what type of c	laim it is. Do no	t list claims already include	ed in Part 1. If more	than one Part 2.
4.1	Aes/goalfinc	Last 4 digits of account numb	er 0002			Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 2461 Harrisburg, PA 17105	When was the debt incurred?		ed 06/06 Last Activ 14	 	CHRIOWII
	Number Street City State Zlp Code	As of the date you file, the cla	im is: Check al	II that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsect	ured claim:			
	\square At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a s report as priority claims	eparation agree	ement or divorce that you	did not	
	■ No	☐ Debts to pension or profit-sh	aring plans, and	d other similar debts		
	☐ Yes	Other. Specify				
		Education	onal			

Debtor	Francis McEvoy		Case number (if known)	
4.2	First Premier Bank	Last 4 digits of account number	9341	\$302.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117	When was the debt incurred?	Opened 05/14 Last Active 7/30/15	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Glelsi/sun Trust Bank Nonpriority Creditor's Name	Last 4 digits of account number	3303	\$0.00
	2401 International Lane Madison, WI 53704	When was the debt incurred?	Opened 6/20/06 Last Active 5/31/18	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify		
		Educationa	al	
4.4	Goal Financial/glelsi Nonpriority Creditor's Name	Last 4 digits of account number	2226	Unknown
	2401 International Lane Madison, WI 53704	When was the debt incurred?	Opened 06/06 Last Active 10/11	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim:	
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	al	

Debtor	1 Francis McEvoy		Case number (if known)	
4.5	Goalf/glelsi Nonpriority Creditor's Name	Last 4 digits of account number	2226	\$0.00
	2401 International Lane Madison, WI 53704	When was the debt incurred?	Opened 6/20/06 Last Active 11/30/11	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	Other. Specify		
	163	Education		
$\overline{}$		Laddanoni		
4.6	Good Samaritan Hospital	Last 4 digits of account number		\$4,365.00
	Nonpriority Creditor's Name 1000 Montauk Hwy West Islip, NY 11795	When was the debt incurred?	6/2007	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	<u> </u>		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	☐ At least one of the debtors and another	Student loans	a ciaim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bi		
4.7	Good Samaritan Hospital Nonpriority Creditor's Name	Last 4 digits of account number		\$2,054.00
	1000 Montauk Hwy West Islip, NY 11795	When was the debt incurred?	4/2010	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	<u> </u>		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bi	II	

Debtor	1 Francis McEvoy		Case number (if known)	
4.8	John T. Mather Memorial Nonpriority Creditor's Name	Last 4 digits of account number	05SM	\$12,633.41
	Hospital	When was the debt incurred?		
	Professional Billing Dept			
	PO Box 5779 Hicksville, NY 11802			
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.		,	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
		☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical Bill	<u> </u>	
4.9	National Recovery Agency	Last 4 digits of account number	2402	\$200.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 67015	When was the debt incurred?	Opened 05/18	
	Harrisburg, PA 17106			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	_		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	Loloim	
	☐ At least one of the debtors and another	Student loans	i Claiii.	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	• •	
	Yes	■ Other. Specify Collection	Attorney Verizon	
4.10	Nelnet	Last 4 digits of account number	1979	\$53,595.00
	Nonpriority Creditor's Name Attn: Claims		Opened 06/06 Last Active	
	Po Box 82505	When was the debt incurred?	10/31/18	
	Lincoln, NE 68501			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	I claim:	
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	<u> </u>	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	☐ Other. Specify		

Educational

Debtor	1 Francis I	McEvoy		Case nu	umber (if known)	
4.11	Nelnet		Last 4 digits of account number	1879		\$44,076.00
	Nonpriority Cre Attn: Claim Po Box 825	ns	When was the debt incurred?		ned 06/06 Last Active	Ψ+4,01 0.00
	Lincoln, NE Number Street	E 68501 City State Zlp Code	As of the date you file, the claim i	s: Check	all that apply	
		the debt? Check one.	☐ Contingent		,	
	Debtor 1 on	ıly	☐ Unliquidated			
	Debtor 2 on	ıly	☐ Disputed			
	Debtor 1 an	nd Debtor 2 only	Type of NONPRIORITY unsecured	d claim:		
	☐ At least one	e of the debtors and another	Student loans			
	☐ Check if th	is claim is for a community debt	☐ Obligations arising out of a sepa	ration ag	reement or divorce that you did not	
	Is the claim su	ubject to offset?	report as priority claims	iration agi	osmonic of divorces that you did not	
	■ No		Debts to pension or profit-sharin	g plans, a	and other similar debts	
	☐ Yes		☐ Other. Specify			
			Educationa	al		
Part 3:	List Other	s to Be Notified About a Debt	That You Already Listed			
trying more	to collect from	you for a debt you owe to someon	e else, list the original creditor in Par ed in Parts 1 or 2, list the additional o	rts 1 or 2	listed in Parts 1 or 2. For example, if a c, then list the collection agency here. Sin here. If you do not have additional person	nilarly, if you have
	nd Address		which entry in Part 1 or Part 2 did you		S .	
	l. Hooten & ciates, PLLC				Creditors with Priority Unsecured Claims	
5505 N Suite	Nesconset F 203	lighway	•	Part 2:	Creditors with Nonpriority Unsecured Claim	S
IVIT. SII	nai, NY 1176		st 4 digits of account number			
Suffol Office	nd Address k County Sh - Civil Bure aphank Ave	n eriff's Lir eau		Part 1:	iginal creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Claim	s
	nk, NY 1198	80				
•	·		st 4 digits of account number			
Part 4:	Add the A	mounts for Each Type of Unse	ecured Claim			
		•		porting p	urposes only. 28 U.S.C. §159. Add the an	nounts for each type
·					Total Claim	
	6a.	Domestic support obligations		6a.	\$ 0.00	
Total cla						
from P		•	=	6b.	\$ 1,300.00	
	6c. 6d.	• •	ury while you were intoxicated ured claims. Write that amount here.	6c. 6d.	\$ <u>0.00</u> \$ 0.00	
		yy		-	<u> </u>	
	6e.	Total Priority. Add lines 6a throug	h 6d.	6e.	\$1,300.00	
					Total Claim	
T. ()	6f.	Student loans		6f.	\$ 97,671.00	
Total cla		Obligations arising out of a sepa	aration agreement or divorce that you	ı _	. 0.00	
	6h.	did not report as priority claims	ng plans, and other similar debts	6g. 6h.	\$ 0.00 \$ 0.00	
	6i.	•	secured claims. Write that amount here		\$	
	3			- **	- 10,007.71	
	6j.	Total Nonpriority. Add lines 6f thr	ough 6i.	6j.	\$117,225.41_	

Fill in this information to identify your case:				
Debtor 1	Francis McEvoy			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					<u> </u>
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
2.0	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5	.,				
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	Oity		Olale	Zii Coue	

Official Form 106G

-III in this infor	mation to identify you	r case:			
Debtor 1	Francis McEvoy	Middle Name	Last Name		
Debtor 2	riistivaille	Middle Name	Last Name		
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case number					
if known)					☐ Check if this is an
					amended filing
	orm 106H	lahtara			
scheaule	H: Your Cod	leptors			12/15
■ No		,			
1. Do you h	ave any codebtors? (If	f you are filing a joint case,	do not list either spous	e as a codebtor.	
☐ Yes					
					ty states and territories include
Arizona, Ca	lifornia, Idaho, Louisiana	a, Nevada, New Mexico, Pu	ierto Rico, Texas, Wasi	nington, and Wisconsin.)
■ No. Go to	line 3.				
☐ Yes. Did	your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in line 2 ag	ain as a codebtor only), Schedule E/F (Officia	if that person is a guaran	ntor or cosigner. Make	sure you have listed t	ng with you. List the person shov the creditor on Schedule D (Offic , Schedule E/F, or Schedule G to
				O-1 O. The accurate	all the standard and a second that dall the
	nn 1: Your codebtor Number, Street, City, State and 2	ZIP Code		Check all schedule	editor to whom you owe the debt es that apply:
				По	
3.1 Name				Schedule D, lin	
				☐ Schedule E/F, ☐ Schedule G, lin	
Niverbar	01				
Number City	r Street	State	ZIP Code		
3.2				☐ Schedule D, lin	۵
Name				Schedule E/F,	
				☐ Schedule C/F,	
Number	r Street				
City	. Gueet	State	ZIP Code		

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Fill	in this information to	o identify your ca	ase:							
De	btor 1	Francis McE	voy			_				
	btor 2 buse, if filing)					_				
Uni	ited States Bankrupt	tcy Court for the	: EASTERN DISTRICT	OF NEW YORK		_				
_	se number			-			Check if this is: An amende A supplement	nt showing		chapter
\circ	fficial Form	1061							lowing date:	
	chedule I: \		ome				MM / DD/ Y	YYY		12/15
sup spo atta	plying correct info use. If you are sep ch a separate shee	rmation. If you arated and you	sible. If two married pec are married and not fili r spouse is not filing w On the top of any additi	ng jointly, and your s ith you, do not includ	spouse de infor	is living mation a	with you, incl bout your spo	ude inform ouse. If mo	nation about ore space is	your needed,
1.	Fill in your emplo	oyment		Debtor 1			Debtor 2	or non-fili	ng spouse	
	If you have more t		Employment status	■ Employed			☐ Emplo	yed		
	attach a separate information about		Employment status	☐ Not employed			☐ Not er	nployed		
	employers.		Occupation	Merchandiser			_			
	Include part-time, self-employed wor		Employer's name	Advantage Sales	s & Mai	keting				
	Occupation may in or homemaker, if		Employer's address	18100 Von Karm Suite 1000 Irvine, CA 92612		enue				
			How long employed to	here?						
Pai	rt 2: Give Det	ails About Mon	thly Income							
spo	use unless you are s	separated.	ate you file this form. If	,		•		•	·	J
	e space, attach a se			ornorne the information	TIOI all	employer	s for that perso	on on the iii	les below. II	you need
						For	Debtor 1	For Debt	tor 2 or g spouse	
2.			ry, and commissions (b calculate what the month		2.	\$	987.00	\$	N/A	
3.	Estimate and list	monthly overti	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross I	ncome. Add lir	ne 2 + line 3.		4.	\$	987.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Francis McEvoy	-	С	ase number (if kr	nown)				
					For Debtor 1			For Debtor		
	Cop	by line 4 here	4.	-	\$ 987	7.00	_		N/A	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$ 176	6.00	\$	j	N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$	0.00	\$;	N/A	
	5c.	Voluntary contributions for retirement plans	5c			0.00	\$	í	N/A	
	5d.	Required repayments of retirement fund loans	5d			0.00			N/A	
	5e.	Insurance Demostic current obligations	5e 5f.		. —	0.00		<u> </u>	N/A	
	5f. 5g.	Domestic support obligations Union dues	5i. 5g		: — ·	0.00 0.00		:	N/A N/A	
	5h.	Other deductions. Specify:	-	,	·	0.00	- '		N/A	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.			5.00	-		N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.			1.00			N/A	
8.		all other income regularly received:	•				- *			
Ο.	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a	a .	\$ (0.00	\$;	N/A	
	8b.	Interest and dividends	8b).	\$ (0.00	\$	1	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c	: .	\$ (0.00	\$	j	N/A	
	8d.	Unemployment compensation	8d	d.	\$ (0.00	\$;	N/A	
	8e.	Social Security	8e	€.	\$ (0.00	\$	í	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	e 8f.		\$		\$		NI/A	
	8g.	Specify: Pension or retirement income	_ 8g		·	0.00 0.00	_ `		N/A N/A	
	8h.	Other monthly income. Specify:	_	,	·		- + \$		N/A	
_			_				- 1			1
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	811.00	+ 9		N/A	= \$	811.00
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-	011100			1071	-	011.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	dep					in <i>Schedu</i>	le J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restrict that amount on the Summary of Schedules and Statistical Summary of Certailies							\$	811.00
									Combine	
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						monthly	income
		Yes. Explain: No work for the month of December. Will contin	ue t	o se	ek longer te	erm	emp	loyment		

Official Form 106I Schedule I: Your Income page 2

Fill i	n this information to identify you	case:					
Debt	Francis McEvo	ру		Ch	neck	if this is:	
Debt (Spo	or 2				Α		ving postpetition chapter the following date:
Unite	ed States Bankruptcy Court for the:	EASTERN DISTRICT OF NEW Y	ORK		N	IM / DD / YYYY	
Case	e numbe r						
(If kn	nown)						
Of	ficial Form 106J						
Sc	hedule J: Your E	xpenses					12/1
info		ossible. If two married people a led, attach another sheet to this question.					
Part 1.	1: Describe Your Househors Is this a joint case?	old					
١.	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in	a senarate household?					
	□ No	ile Official Form 106J-2, Expense	s for Separate Housel	nold of D	ebto	or 2.	
2.	Do you have dependents?	No					
	Do not list Debtor 1 [and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.						☐ Yes ☐ No
							☐ Yes
							☐ No
							☐ Yes
							□ No
3.	Do your expenses include expenses of people other tha yourself and your dependents						☐ Yes
Esti	2: Estimate Your Ongoing mate your expenses as of a date after the ba	Monthly Expenses r bankruptcy filing date unless y nkruptcy is filed. If this is a sup	you are using this for	rm as a	sup	plement in a Cha	pter 13 case to report
	licable date.	initiapioy io med. Il tillo io a oup	piememai <i>Genedale</i> (o, onco		box at the top o	
the		n-cash government assistance have included it on <i>Schedule I:</i>				Your expe	enses
(•	,						
4.	The rental or home ownership payments and any rent for the g	p expenses for your residence. ground or lot.	Include first mortgage	4.	\$		850.00
	If not included in line 4:						
	4a. Real estate taxes			4a.			0.00
	4b. Property, homeowner's, o			4b.			0.00
	4c. Home maintenance, repa			4c.			0.00
5.	4d. Homeowner's associationAdditional mortgage payment	n or condominium dues ts for your residence, such as ho	ome equity loans	4d. 5.	\$ \$		0.00

Deb	tor 1	Francis	McEvoy	Case r	um	ber (if know	n)
6.	Utilit	ies:					
-	6a.	Electricity	heat, natural gas	6	Sa.	\$	90.00
	6b.		wer, garbage collection	6	ßb.	\$	0.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable serv	ices (Sc.	\$	0.00
	6d.	Other. Sp	ecify: Cell Phone		ßd.		76.00
7.	Food		ekeeping supplies	_	7.		0.00
8.			hildren's education costs		8.	\$	0.00
9.			ry, and dry cleaning		9.	\$	0.00
		•	roducts and services		10.		0.00
11.		-	ntal expenses		11.		0.00
			Include gas, maintenance, bus or train fare.			· —	
			ar payments.	•	12.	\$	0.00
13.			clubs, recreation, newspapers, magazines,	and books	13.	\$	0.00
			ributions and religious donations		14.	\$	0.00
15.	Insu	rance.	-				
	Do n	ot include ir	surance deducted from your pay or included in	n lines 4 or 20.			
	15a.	Life insura	nce		āa.		0.00
	15b.	Health ins	urance	15	ōb.	\$	0.00
	15c.	Vehicle in	surance	15	ōс.	\$	181.00
	15d.	Other insu	rance. Specify:	15	ōd.	\$	0.00
16.	Taxe Spec		clude taxes deducted from your pay or include		16.	\$	0.00
17		,	ease payments:		١٠.	Ψ	0.00
17.			ents for Vehicle 1	15	₹a.	\$	0.00
			ents for Vehicle 2		b.		0.00
		Other. Sp			7c.	·	0.00
		Other. Sp			d.	·	0.00
18			of alimony, maintenance, and support that		u.	Ψ	0.00
10.			your pay on line 5, Schedule I, Your Income		18.	\$	0.00
19.			s you make to support others who do not li			\$	0.00
	Spec			•	19.	· —	
20.			erty expenses not included in lines 4 or 5 o	f this form or on Schedule I	: Y	our Incom	ie.
			on other property		a.		0.00
	20b.	Real estat	e taxes	20	Db.	\$	0.00
	20c.	Property, I	nomeowner's, or renter's insurance	20	Oc.	\$	0.00
			ice, repair, and upkeep expenses	20	d.	\$	0.00
			er's association or condominium dues	20	e.	\$	0.00
21.		r: Specify:				+\$	0.00
							0.00
22.			monthly expenses				
			through 21.			\$	1,197.00
	22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from	n Official Form 106J-2		\$	
	22c.	Add line 22	a and 22b. The result is your monthly expense	es.		\$	1,197.00
23.	Calc	ulate your	monthly net income.				
			12 (your combined monthly income) from Scho	edule I. 23	Ba.	\$	811.00
			monthly expenses from line 22c above.		ßb.	-\$	1,197.00
		1,7,7.5	, ,				
	23c.		our monthly expenses from your monthly inco is your <i>monthly net income</i> .	me. 23	3c.	\$	-386.00
	_						
24.			an increase or decrease in your expenses v				
			u expect to finish paying for your car loan within the yeterms of your mortgage?	ear or do you expect your mortgage	e pa	ayment to inc	crease or decrease because of a
			ionio oi your mongage:				
			Explain here:				
	Y	es.	LAPIAIII HEIE.				

Fill in this infor	rmation to identify your	case:			
Debtor 1	Francis McEvoy				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT (OF NEW YORK		
Case number (if known)					☐ Check if this is an amended filing
Official For					
Declarat	tion About a	n Individual	Debtor's Sch	nedules	12/15
years, or both. 1	ry or property by fraud in 18 U.S.C. §§ 152, 1341, 1		kruptcy case can result ir	n fines up to \$250,0	000, or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sun	nmary and schedules filed	d with this declarat	tion and
X /s/ Fra	ncis McEvoy		X		
Franci	is McEvoy ure of Debtor 1		Signature of I	Debtor 2	
Date _	December 3, 2018		Date		

Official Form 106Dec

Debtor 1 Francis McEvoy Frank Nare Last Naire Las	-: 11	in this info						
Debtor 2 Secure II, Bling) First Name Middle Name Last Name	FIII	in this infor	mation to identify you	r case:				
Debtor 2 [Segonare A, Birgs] From Nome Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 1 Prior Address: Dates Debtor 1 Debtor 1 Prior Address: Dates Debtor 2 Debtor 1 Prior Address: Dates Debtor 1 Debtor 1 Prior Address: Dates Debtor 2 Debtor 1 Prior Address: Dates Debtor 1 Debtor 1 Prior Address: Dates Debtor 2 Dates Debtor 2 Dates Debtor 2 Dates Debtor 1 Debtor 3 Debtor 4 Debtor 5 Dates Debtor 5 Dates Debtor 6 Debtor 6 Debtor 6 Debtor 7 Dates Debtor 7 Dates Debtor 7 Dates Debtor 9 Dates Debtor 1 Debtor 9 Debtor 9 Dates Debtor 9 Dates Debtor 9 Dates Debtor 1 Debtor 9 Dates Debtor 9 Da	Deb	otor 1		Middle Name		Last Name		
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Africal Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Africal Form 108 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married Details About Your Marital Status and Where You live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there	Deb	otor 2	. not reame	madio Hamo		<u> </u>		
Case number Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there No Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Debtor 1 Sources of income Gross income Check all that apply. 1. Ohig you have any income from employment or from operating a business during this year or the two previous calendar years? 1. Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. 1. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Sources of income Gross income Check all that apply. Check all that apply. Gross income Check all that apply. Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Wag	(Spo	use if, filing)	First Name	Middle Name		Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy ### Affairs for Individuals Filing for Bankruptcy #### Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. ###################################	Uni	ted States Ba	ankruptcy Court for the:	EASTERN DISTR	CT OF NEW	YORK		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy ### Affairs for Individuals Filing for Bankruptcy #### Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. ###################################	Cas	se number						
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married No No Married No Married No Married No Married No No Married No Married		_					_	
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What is your current marital status?								
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Married	Par	t 1 Give	Details About Your Ma	rital Status and Whe	ere You Lived	l Before		
Married	4							
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2. During the last 3 years, have you lived anywhere other than where you live now? No		☐ Married	d					
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lived there						·		Datas Dahtar 2
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Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Did you have any income from employment or from operating a business during this year or the two previous calendar years? For the two previous calendar years? From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips		_	loko ouro vou fill out Sok	andula H. Vaur Cadab	toro (Official E	Form 106H)		
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Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pebtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Pebtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$6,178.00 Wages, commissions, bonuses, tips	Par	t 2 Expla	ain the Sources of You	r Income				
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$6,178.00 Wages, commissions, bonuses, tips	4.	Fill in the to	tal amount of income yo	u received from all job	s and all busi	inesses, including par	t-time activities.	endar years?
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the date you filed for bankruptcy: wages, commissions, bonuses, tips bonuses, tips					(bef	ore deductions and		(before deductions
☐ Operating a business ☐ Operating a business				-	ions,	\$6,178.00		
				☐ Operating a busing	iess		☐ Operating a business	

Official Form 107

De	ebtor 1 Francis McEvoy		Case number (if known)						
		Debtor 1			Debtor 2				
		Sources of income Check all that apply.	Gross ind (before de exclusions	eductions and	Sources of inc Check all that a		Gross income (before deductions and exclusions)		
	or last calendar year: anuary 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips		\$30,946.00	☐ Wages, com bonuses, tips	missions,			
		☐ Operating a business			☐ Operating a	ousiness			
5.	Did you receive any other incom Include income regardless of whet unemployment, and other public be gambling and lottery winnings. If you List each source and the gross inc	her that income is taxable. E enefit payments; pensions; re ou are filing a joint case and	xamples of othental income; income income	her income are interest; divider me that you red	alimony; child supp nds; money collecte beived together, list	ed from laws it only once	suits; royalties; and		
	■ No □ Yes. Fill in the details.								
		Dahtan 4			Dobton 0				
		Debtor 1 Sources of income Describe below.	each sou	eductions and	Debtor 2 Sources of inc Describe below.		Gross income (before deductions and exclusions)		
	During the 90 days before No. Go to line of Yes List below paid that continuous * Subject to adjustment Yes. Debtor 1 or Debtor 2 of Yes.	each creditor to whom you pareditor. Do not include paymen payments to an attorney for ton 4/01/19 and every 3 years both have primarily cons	did you pay ar aid a total of \$ ents for domes this bankruptours after that for sumer debts.	6,425* or more stic support obli by case. or cases filed on	in one or more pay gations, such as ch n or after the date o	ments and nild support of adjustment	and alimony. Also, do		
	_	ore you filed for bankruptcy, o	aid you pay ai	iy creditor a tota	ai oi \$600 oi more				
	include pay	 each creditor to whom you performents for domestic support of for this bankruptcy case. 							
	Creditor's Name and Address	Dates of paym	ent To	otal amount	Amount you still owe	Was this	payment for		
7.	Within 1 year before you filed fo Insiders include your relatives; any corporations of which you are an o including one for a business you o support and alimony.	general partners; relatives of fficer, director, person in con	f any general trol, or owner	on a debt you of partners; partners of 20% or more	wed anyone who erships of which yo of their voting sec	u are a gen urities; and	eral partner; any managing agent,		
	■ No □ Yes. List all payments to an in	nsider							
	Insider's Name and Address	Dates of paym	ent To	otal amount	Amount you	Reason fo	or this payment		

Official Form 107

De	ebtor 1 Francis McEvoy		Cas	e number (if know	n)		
8.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		nyments or transfer a	any property on	account of a de	ebt that benefited an	
	■ No □ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment tor's name	
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	Within 1 year before you filed for bankrup List all such matters, including personal injur modifications, and contract disputes.						
	NoYes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of the	e case	
	John T. Mather Memorial Hospital vs Francis McEvoy CV-010184-05/SM	oy 4th District Court				□ Pending□ On appeal■ Concluded	
	State Of New York vs FRANCIS MCEVOY E715513500W0119	STATE TAX WARRANT	SUFFOLK COL	INTY CLERK	☐ Pending ☐ On appea ☐ Conclude		
					- 311.00		
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		perty repossessed, f	oreclosed, garr	nished, attached	l, seized, or levied?	
	Creditor Name and Address	Describe the Property	1	Dat	е	Value of the	
		Explain what happene	ed			property	
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment be No Yes. Fill in the details.		cluding a bank or fi	nancial instituti	on, set off any a	amounts from your	
	Creditor Name and Address	Describe the action the	ne creditor took	Dat take	e action was	Amount	
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or ■ No □ Yes		perty in the possess			fit of creditors, a	

Deb	btor 1 Francis McEvoy		Case number (if known)							
Par	rt 5: List Certain Gifts and Contribution	ns								
13.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift.	uptcy, o	did you give any gifts with a total value of more	than \$600 per person	?					
	Gifts with a total value of more than \$60 per person	00	Describe the gifts	Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift and Address:	l								
14.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or o		did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?					
	Gifts or contributions to charities that the more than \$600		Describe what you contributed	Dates you contributed	Value					
	Charity's Name Address (Number, Street, City, State and ZIP Code	e)		Contributed						
Par	rt 6: List Certain Losses									
15.	disaster, or gambling?	ptcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other					
	Yes. Fill in the details.	Dogori	he any incurance saverene for the less	Data of wave	Value of manager					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List g insurance claims on line 33 of Schedule A/B: ty.	Date of your loss	Value of property lost					
Par	rt 7: List Certain Payments or Transfers	S								
16.	consulted about seeking bankruptcy or p	preparii	d you or anyone else acting on your behalf pay ng a bankruptcy petition? s, or credit counseling agencies for services require		rty to anyone you					
	Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	′ ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Macco & Stern, LLP 2950 Express Drive South Suite 109 Islandia, NY 11749		For services rendered in connection with this instant filing \$1,230.00. Filing fee \$335.00. See 2016(b) Statement attached.	11/20/18	\$1,000.00					
17.	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that	ditors o		or transfer any prope	rty to anyone who					
	■ No									
	Yes. Fill in the details.		Description and value of any array	Date was surf	A					
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment					

Debtor 1 Francis McEvoy

Case number (if known)

18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa le as security (such as t	irs? he granting of a s								
	Person Who Received Transfer Address	Description and va property transferre		Describe any payments rec paid in excha	eived or debts	Date transfer was made					
	Person's relationship to you										
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No ☐ Yes. Fill in the details.		y property to a s	elf-settled trust	or similar device o	f which you are a					
	Name of trust	Description and va	alue of the prope	erty transferred		Date Transfer was made					
	List of Certain Financial Accounts, Instruction Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or	were any financial acc	counts or instru	nents held in yo		ur benefit, closed,					
	houses, pension funds, cooperatives, associa ■ No ■ Yes. Fill in the details.	ations, and other finan	icial institutions								
		Last 4 digits of Type of account account number instrument			•	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?										
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, Str State and ZIP Code)		escribe the con	Do you still have it?						
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before you f	iled for bankruptcy	r?					
	No Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the con	tents	Do you still have it?					
Par	rt 9: Identify Property You Hold or Control fo	or Someone Else									
23.	for someone.	eone else owns? Inclu	ide any property	you borrowed f	rom, are storing fo	r, or hold in trust					
	Yes. Fill in the details. Owner's Name	Where is the pres	ortv2	locariba tha nra	perty	Value					
	Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, St Code)		escribe the pro	p e rty	value					
Par	rt 10: Give Details About Environmental Infor	mation									

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Francis McEvoy

Case number (if known)

	regulations controlling the cleanup of these	substances, wastes, or material.					
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	ort all notices, releases, and proceedings that	you know about, regardless of wher	they occurred.				
24.	Has any governmental unit notified you that y	you may be liable or potentially liable	under or in violation of an environm	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of a	ny release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admi	nistrative proceeding under any envi	ronmental law? Include settlements	and orders.			
	■ No						
	☐ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or C	onnections to Any Business					
27.	Within 4 years before you filed for bankruptc	y, did you own a business or have an	y of the following connections to an	y business?			
	☐ A sole proprietor or self-employed in	• •	•				
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnersh	ip (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing exe	cutive of a corporation					
	☐ An owner of at least 5% of the voting	or equity securities of a corporation					
	■ No. None of the above applies. Go to Pa	art 12.					
	Yes. Check all that apply above and fill i		s.				
		Describe the nature of the business	Employer Identification numbe				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.			
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Indinstitutions, creditors, or other parties.							
	■ No						
	Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

Debtor 1 Francis McEvoy		у	Case number (if known)		
with a ba		result in fines up to \$250,000	tement, concealing property, or obtaining money or property by fraud in connection , or imprisonment for up to 20 years, or both.		
/s/ Fran	ncis McEvoy				
Francis McEvoy Signature of Debtor 1			Signature of Debtor 2		
Date _[December 3, 2018	3	Date		
Did you	attach additional pa	ges to Your Statement of Fin	ancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?		
■ No					
☐ Yes					
Did you	pay or agree to pay	someone who is not an attor	ney to help you fill out bankruptcy forms?		
■ No					
☐ Yes. N	Name of Person	. Attach the Bankruptcy Peti	tion Preparer's Notice, Declaration, and Signature (Official Form 119).		

Fill in this infor	mation to identify your case:			
Debtor 1	Francis McEvoy			
		Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the: EAS	IEKN DISTR	ICT OF NEW YORK	
Case number				_ 0
(if known)				Check if this is an amended filing
				amended ming
041.15	4.00			
Official Fo				
Stateme	nt of Intention fo	or Indiv	iduals Filing Under Chapte	er 7 12/15
	lividual filing under chapter 7,	-	I out this form if:	
_	ve claims secured by your pro	•		
	sed personal property and the		ot expired. you file your bankruptcy petition or by the date s	et for the meeting of creditors
	ever is earlier, unless the cour		e time for cause. You must also send copies to the	
If two married n	oonlo are filing tegether in a i	nint caso ho	th are equally responsible for supplying correct i	nformation Roth dobtors must
	nd date the form.	Jiiit Case, DO	in are equally responsible for supplying correct i	mormation. Both debtors must
Be as complete	and accurate as possible. If m	ore space is	needed, attach a separate sheet to this form. On	the top of any additional pages
	our name and case number (i		riceded, actuari a separate silect to this form. On	the top of any additional pages,
Part 1: List Y	our Creditors Who Have Secu	rad Claims		
LIST	our creditors willo have beca	ileu Ciaiilis		
1. For any credit information be		Schedule D	: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
	reditor and the property that is o	ollateral	What do you intend to do with the property that	
			secures a debt?	as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	_
Description of	f		Retain the property and enter into a	☐ Yes
property			Reaffirmation Agreement. Retain the property and [explain]:	
securing debt	:		The Retain the property and [explain].	
				_
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	
Description of	f		Retain the property and enter into a	☐ Yes
property	•		Reaffirmation Agreement. Retain the property and [explain]:	
securing debt			Tretain the property and [explain].	
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	□ Vaa
Description of	f		☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property			Realifimation Agreement. ☐ Retain the property and [explain]:	
securing debt	• •			

Official Form 108

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

page 1

☐ No

Debtor 1	Francis McEvoy	Case number (if known)	
name: Descrip property securin	y	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
For any ur in the info	rmation below. Do not list real estate le	/ Leases ou listed in Schedule G: Executory Contracts and Unexpire eases. Unexpired leases are leases that are still in effect; th y lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	e lease period has not yet ended.
Describe	your unexpired personal property leas	es	Will the lease be assumed?
Lessor's r Description Property:	name: n of leased		□ No □ Yes
Lessor's r Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's r Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's r Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's r Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's r Descriptio Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Under per	Sign Below nalty of perjury, I declare that I have indeed hat is subject to an unexpired lease.	licated my intention about any property of my estate that se	
X /s/ F	rancis McEvoy ncis McEvoy ature of Debtor 1	XSignature of Debtor 2	
Date	December 3, 2018	Date	

Official Form 108

Fill in this info							
	mation to identify your case:			eck one bo 2A-1Supp:	ox only as d	irected in this form and	d in Form
Debtor 1	Francis McEvoy			z/к тоарр.			
Debtor 2 (Spouse, if filing)				■ 1. There	e is no pres	umption of abuse	
United States I	Bankruptcy Court for the: Eastern District of N	lew York				o determine if a presu	•
_						nade under <i>Chapter 7</i> icial Form 122A-2).	Means Test
Case number (if known)			— ,		`	does not apply now be	acquee of
, ,						service but it could a	
				☐ Check	if this is a	n amended filing	
Official F	orm 122A - 1					_	
	7 Statement of Your Curr	ent Moi	nthly Inc	ome			12/15
•							
separate sheet to number (if knowr	and accurate as possible. If two married people are of this form. Include the line number to which the ad n). If you believe that you are exempted from a pres	ditional information of abu	ation applies. On se because you	the top of do not have	any addition primarily c	al pages, write your nam onsumer debts or becau	e and case se of qualifying
	complete and file Statement of Exemption from Pre Ilculate Your Current Monthly Income	Sumption of Ab	use Under § 707	<i>(Δ)(2)</i> (Oπic	iai Form 12.	zA-13upp) with this form	
1. What is y	our marital and filing status? Check one only						
-	arried. Fill out Column A, lines 2-11.	, -					
	ed and your spouse is filing with you. Fill out	both Columns	s A and B. lines	: 2-11.			
	ed and your spouse is NOT filing with you. Y						
	ng in the same household and are not legal	-	•	olumns A a	nd B. lines	2-11.	
	ng separately or are legally separated. Fill ou						ou declare under
per	nalty of perjury that you and your spouse are leging apart for reasons that do not include evading	gally separated	d under nonbar	nkruptcy la	w that appli	es or that you and you	
	erage monthly income that you received from all so example, if you are filing on September 15, the 6-month						
6 months, add	If the income for all 6 months and divide the total by 6. If all property, put the income from that property in one co	Fill in the result. I	Do not include an	y income an	nount more th	nan once. For example, if I	
				Column A		Column B	
				Debtor 1		Debtor 2 or non-filing spouse	
2 Your gro	ss wages, salary, tips, bonuses, overtime, a	nd commissi	ons (before			non-ming spouse	
all payroll	deductions).		,	\$	846.42	\$	
	and maintenance payments. Do not include p B is filled in.	ayments from	a spouse if	\$	0.00	\$	
4. All amou	nts from any source which are regularly paid	d for househo	old expenses				
of you or	your dependents, including child support. Inmarried partner, members of your household,	nclude regular	r contributions				
	mates. Include regular contributions from a spo			•	0.00	•	
	o not include payments you listed on line 3.			\$	0.00	\$	
5. Net incor	me from operating a business, profession, o		tor 1				
Gross rec	ceipts (before all deductions)	\$ 0.00					
	and necessary operating expenses	-\$ 0.00					
•	hly income from a business, profession, or farm	0.00	Copy here ->	\$	0.00	\$	
6. Net incor	me from rental and other real property						
			tor 1				
	ceipts (before all deductions)	\$ 0.00					
•	and necessary operating expenses	-\$ 0.00	Convibora	c	0.00	¢	
	hly income from rental or other real property	\$	Copy here ->	·. ———	0.00	\$	
7. Interest,	dividends, and royalties			\$	0.00	Ψ	

Official Form 122A-1

Case number (if known)

						Column A Debtor 1		Column Debtor 2		
8.	Unem	ploy	ment compensation			\$	0.00	\$		
			er the amount if you contend that the amo Social Security Act. Instead, list it here:	unt received was a ben	efit					
					.00					
	For	your	spouse	\$						
9.			r retirement income. Do not include any er the Social Security Act.	amount received that w	as a	\$	0.00	\$		
10.	Do not receive	t inclued as stic te	om all other sources not listed above. So ade any benefits received under the Social a a victim of a war crime, a crime against le perrorism. If necessary, list other sources of	d Security Act or paymenumanity, or internation	ents al or					
						\$	0.00	\$		
						\$	0.00	\$		
		То	ntal amounts from separate pages, if any.		+	\$	0.00	\$		
11.			your total current monthly income. Add in. Then add the total for Column A to the		\$	846.42	+ \$		= \$	846.42
										current monthly
Part	2:	Dete	ermine Whether the Means Test Applies	s to You					incom	ie
12.	Calcu	late y	our current monthly income for the ye	ar. Follow these steps:						
	12a. C	Сору	your total current monthly income from lin	e 11		Сор	y line 11 l	nere=>	\$	846.42
	M	/lultip	ly by 12 (the number of months in a year)						X	
	12b. T	he re	esult is your annual income for this part of	the form				1	2b. \$	10,157.04
13.	Calcu	late t	he median family income that applies t	to you. Follow these sto	eps:					
	Fill in t	the st	ate in which you live.	NY						
			iato in windir you iivo.							
	Fill in t	the n	umber of people in your household.	1						
	To find	d a lis	nedian family income for your state and sight of applicable median income amounts, you. This list may also be available at the ba	go online using the link		d in the separ			3. \$	54,014.00
14.	How o	do the	e lines compare?							
	14a.		Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, o	check bo	ox 1, There is	no presur	nption of a	buse.	
	14b.		Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	p of page 1, check box	2, <i>The p</i>	oresumption o	f abuse is	determine	d by Form	122A-2.
Part	3:	Sigr	n Below							
	В	By sig	ning here, I declare under penalty of perju	ury that the information	on this s	tatement and	l in any att	achments	is true and	correct.
	Х	/s/	Francis McEvoy							
			ncis McEvoy nature of Debtor 1							
	Date		cember 3, 2018							
	If		r DD / YYYY checked line 14a, do NOT fill out or file Fo	orm 122A-2						
		•	checked line 14b, fill out Form 122A-2 an							
	- 11	you	onconou mio 170, mi out i omi 122/72 an	~ IL WILL HIIS IOIIII.						

Official Form 122A-1

Debtor 1 Francis McEvoy

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Francis McEvoy		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOI	RNEY FOR D	EBTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy.	or agreed to be paid	d to me, for services r	
	For legal services, I have agreed to accept		\$	1,230.00	
	Prior to the filing of this statement I have received		\$	665.00	
	Balance Due		\$	565.00	
2.	335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. ′	Γhe source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
_	_	e ea a	1 4	1 1	c 1 c
5.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are men	ibers and associates of	i my iaw iirm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				aw firm. A
6.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspect	ts of the bankruptcy	case, including:	
1	a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, sta c. Representation of the debtor at the meeting of credit f. [Other provisions as needed] Exemption planning; preparation and fi	tement of affairs and plan which ors and confirmation hearing, an	n may be required; nd any adjourned he	arings thereof;	кruptcy;
7.]	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any di any other adversary proceeding.			ces, relief from sta	y actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	payment to me for i	representation of the o	lebtor(s) in
D	ecember 3, 2018	/s/ Cooper J Mac	со		
D	ate	Cooper J Macco Signature of Attorne	ev		
		Macco and Stern	, LLP		
		2950 Express Dri Suite 109	ve South		
		Islandia, NY 1174			
		631-549-7900 Fa	x: 631-549-7845		
		Name of law firm			

United States Bankruptcy Court Eastern District of New York

In re	Francis McEvoy		Case No.	
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Suite 109

Islandia, NY 11749 631-549-7900 Fax: 631-549-7845

USBC-44 Rev. 9/17/98

Aes/goalfinc Attn: Bankruptcy Po Box 2461 Harrisburg, PA 17105

First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

Glelsi/sun Trust Bank 2401 International Lane Madison, WI 53704

Goal Financial/glelsi 2401 International Lane Madison, WI 53704

Goalf/glelsi 2401 International Lane Madison, WI 53704

Good Samaritan Hospital 1000 Montauk Hwy West Islip, NY 11795

Internal Revenue Service PO Box 7317 Philadelphia, PA 19101-7317

John T. Mather Memorial Hospital Professional Billing Dept PO Box 5779 Hicksville, NY 11802

National Recovery Agency Attn: Bankruptcy Po Box 67015 Harrisburg, PA 17106

Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501 NYS Department of Taxation & Finance Bankruptcy Unit PO Box 5300 Albany, NY 12205-5300

Paul J. Hooten & Associates, PLLC 5505 Nesconset Highway Suite 203 Mt. Sinai, NY 11766

Suffolk County Sheriff's Office - Civil Bureau 360 Yaphank Ave Suite 1A Yaphank, NY 11980

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:.

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:
[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]
■ NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.
☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:
1. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE:
(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
2. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE:
CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
3. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:

DEBTOR(S): Francis McEvoy

DISCLOSURE OF RELATED CASES (cont'd)				
CURRENT STATUS OF RELATED CASE:				
(Discharged/a	waiting discharge, confirmed, dismissed, etc.)			
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above	ve):			
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL SCHEDULE "A" OF RELATED CASE:	L PROPERTY") WHICH WAS ALSO LISTED IN			
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who have have eligible to be debtors. Such an individual will be required to file a s				
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, A	AS APPLICABLE:			
I am admitted to practice in the Eastern District of New York (Y/N): _	<u>Y</u>			
CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/p	petitioner's attorney, as applicable):			
I certify under penalty of perjury that the within bankruptcy case is not as indicated elsewhere on this form.	related to any case now pending or pending at any time, except			
/s/ Cooper J Macco				
Cooper J Macco Signature of Debtor's Attorney Macco and Stern, LLP 2950 Express Drive South	Signature of Pro Se Debtor/Petitioner			
Suite 109 Islandia, NY 11749 631-549-7900 Fax:631-549-7845 Signature of Pro Se Joint Debtor/Petitioner				
	Mailing Address of Debtor/Petitioner			
	City, State, Zip Code			
	Area Code and Telephone Number			

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009